

B6A (Official Form 6A) (12/07)  
In re Richard M. Critchfield & Catherine M. Critchfield  
DebtorCase No. 15-24397-GLT  
(If known)**SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY             | NATURE OF DEBTOR'S INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF SECURED CLAIM |
|--|---|-----------------------------------|--|-------------------------|
| RD #1, Box 204(679 Lowber Road), Irwin, PA 15642 |   | J                                 | 125,000.00   | Exceeds Value           |
| Total >  | 125,000.00                              |                                   |  |                         |

(Report also on Summary of Schedules.)

In re Richard M. Critchfield & Catherine M. Critchfield  
DebtorCase No. 15-24397-GLT  
(If known)**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

| TYPE OF PROPERTY  | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION<br>OF PROPERTY | HUSBAND, WIFE, JOINT<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST<br>IN PROPERTY,<br>WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM<br>OR EXEMPTION |
|---|------------------|---|--------------------------------------|--|
| 1. Cash on hand.  | X                | Checking Account - Irwin Bank and Trust | J                                    | 3,000.00   |
| 2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.                      | X                | Furniture<br>Residence                  | J                                    | 5,000.00   |
| 3. Security deposits with public utilities, telephone companies, landlords, and others.   | X                | Clothing<br>Residence                   | J                                    | 1,000.00   |
| 4. Household goods and furnishings, including audio, video, and computer equipment.   | X                |   |                                      |  |
| 5. Books. Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.   | X                |   |                                      |  |
| 6. Wearing apparel.   | X                |   |                                      |  |
| 7. Furs and jewelry.  | X                |   |                                      |  |
| 8. Firearms and sports, photographic, and other hobby equipment.  | X                |   |                                      |  |
| 9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.  | X                |   |                                      |  |
| 10. Annuities. Itemize and name each issuer.  | X                |   |                                      |  |
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X                |   |                                      |  |

In re Richard M. Critchfield & Catherine M. Critchfield  
DebtorCase No. 15-24397-GLT  
(If known)**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

| TYPE OF PROPERTY   | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION<br>OF PROPERTY | HUSBAND, WIFE, JOINT<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST<br>IN PROPERTY,<br>WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM<br>OR EXEMPTION |
|--|------------------|---|--------------------------------------|--|
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.  | X                |   |                                      |  |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize.  | X                |   |                                      |  |
| 14. Interests in partnerships or joint ventures. Itemize.  | X                |   |                                      |  |
| 15. Government and corporate bonds and other negotiable and non-negotiable instruments.  | X                |   |                                      |  |
| 16. Accounts receivable.   | X                |   |                                      |  |
| 17. Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars.  | X                |   |                                      |  |
| 18. Other liquidated debts owing debtor including tax refunds. Give particulars.   | X                |   |                                      |  |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.   | X                |   |                                      |  |
| 20. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.   | X                |   |                                      |  |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each.   | X                |   |                                      |  |
| 22. Patents, copyrights, and other intellectual property. Give particulars.  | X                |   |                                      |  |
| 23. Licenses, franchises, and other general intangibles. Give particulars.   | X                |   |                                      |  |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |   |                                      |  |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories.   |                  | 1999 Subaru Outback<br>Residence        | J                                    | 1,000.00   |
|  |                  | 1994 Chevrolet Blazer S-10<br>Residence | J                                    | 1,500.00   |

**In re** Richard M. Critchfield & Catherine M. Critchfield  
**Debtor**

**Case No.** 15-24397-GLT  
**(If known)**

## **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

| TYPE OF PROPERTY   | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION<br>OF PROPERTY | HUSBAND, WIFE, JOINT<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST<br>IN PROPERTY,<br>WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM<br>OR EXEMPTION |                              |
|--|------------------|---|--------------------------------------|--|------------------------------|
|  |                  |   |                                      | 0  | continuation sheets attached |
| 26. Boats, motors, and accessories.                                  | X                |   |                                      |  |                              |
| 27. Aircraft and accessories.  | X                |   |                                      |  |                              |
| 28. Office equipment, furnishings, and supplies.                     | X                |   |                                      |  |                              |
| 29. Machinery, fixtures, equipment, and supplies used in business.   | X                |   |                                      |  |                              |
| 30. Inventory.   | X                |   |                                      |  |                              |
| 31. Animals.   | X                |   |                                      |  |                              |
| 32. Crops - growing or harvested. Give particulars.                  | X                |   |                                      |  |                              |
| 33. Farming equipment and implements.                                | X                |   |                                      |  |                              |
| 34. Farm supplies, chemicals, and feed.                              | X                |   |                                      |  |                              |
| 35. Other personal property of any kind not already listed. Itemize. | X                |   |                                      |  |                              |

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

In re Richard M. Critchfield & Catherine M. Critchfield  
Debtor

Case No. 15-24397-GLT  
(If known)

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:  
(Check one box)

11 U.S.C. § 522(b)(2)  Check if debtor claims a homestead exemption that exceeds \$155,675\*.  
 11 U.S.C. § 522(b)(3)

| DESCRIPTION OF PROPERTY                 | SPECIFY LAW PROVIDING EACH EXEMPTION                   | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION |
|---|--|----------------------------|---|
| Clothing                                | (Husb)11 U.S.C. 522(d)(3)<br>(Wife)11 U.S.C. 522(d)(3) | 500.00<br>500.00           | 1,000.00  |
| Furniture                               | (Husb)11 U.S.C. 522(d)(3)<br>(Wife)11 U.S.C. 522(d)(3) | 2,500.00<br>2,500.00       | 5,000.00  |
| 1999 Subaru Outback                     | (Wife)11 U.S.C. 522(d)(5)                              | 1,000.00                   | 1,000.00  |
| 1994 Chevrolet Blazer S-10              | (Husb)11 U.S.C. 522(d)(2)                              | 1,500.00                   | 1,500.00  |
| Checking Account - Irwin Bank and Trust | (Husb)11 U.S.C. 522(d)(5)<br>(Wife)11 U.S.C. 522(d)(5) | 1,500.00<br>1,500.00       | 3,000.00  |

\*Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

## B6D (Official Form 6D) (12/07)

In re Richard M. Critchfield & Catherine M. Critchfield,  
Debtor

Case No 15-24397-GLT

(If known)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See Instructions Above.)                 | CODEBTOR | HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED,<br>NATURE OF LIEN, AND<br>DESCRIPTION AND<br>VALUE OF PROPERTY<br>SUBJECT TO LIEN   | CONTINGENT | UNLIQUIDATED | AMOUNT<br>OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION,<br>IF ANY |
|---|----------|--------------------------------------|--|------------|--------------|---|---------------------------------|
|   |          |                                      |  |            |              |   |                                 |
| ACCOUNT NO. XXXXXX9   |          |                                      | Incurred: 10/4/2002<br>Lien: First Mortgage<br>Security: RD #1, Box 204(679 Lowber<br>Road), Irwin, PA 15642 |            |              |   |                                 |
| Caliber Home Loans, Inc.<br>13801 Wireless Way<br>Oklahoma City, OK 73134   | J        |                                      | VALUE \$ 125,000.00  |            |              | 110,194.00  | 0.00                            |
| ACCOUNT NO.   |          |                                      |  |            |              |   |                                 |
| Margaret Gairo, Esquire<br>McCabe, Wesiberg & Conway, P.C.<br>123 South Broad Street, Suite 1400<br>Philadelphia, PA 19109    |          |                                      |  |            |              | Notice Only   | Notice Only                     |
|   |          |                                      | VALUE \$ 0.00  |            |              |   |                                 |
| ACCOUNT NO. XXXXXXXXX9838   |          |                                      |  |            |              |   |                                 |
| The CIT Group Consumer Finance, Inc.<br>715 S. Metropolitan Ave., Suite 150<br>P.O. Box 24610<br>Oklahoma City, OK 73124-0610 | J        |                                      |  |            |              | Notice Only   | Notice Only                     |
|   |          |                                      | VALUE \$ 125,000.00  |            |              |   |                                 |

0 continuation sheets attached

Subtotal  $\gg$   
(Total of this page)  
Total  $\gg$   
(Use only on last page)

\$ 110,194.00 \$ 0.00  
\$ 110,194.00 \$ 0.00  
(Report also on  
Summary of Schedules) (If applicable, report  
Summary of Certain  
Liabilities and Related  
Data.)

**B6E (Official Form 6E) (04/13)**

In re Richard M. Critchfield & Catherine M. Critchfield,  
Debtor

Case No. 15-24397-GLT  
(if known)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

**Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

**Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

**Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

**Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

\*Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

**B6E (Official Form 6E) (04/13) - Cont.**

In re Richard M. Critchfield & Catherine M. Critchfield,  
Debtor

Case No. 15-24397-GLT  
(if known)

**Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

**Deposits by individuals**

Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

**Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

**Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

**Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

## B6F (Official Form 6F) (12/07)

In re Richard M. Critchfield & Catherine M. Critchfield  
DebtorCase No. 15-24397-GLT

(If known)

**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | CODEBTOR<br><br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF,<br>SO STATE. | CONTINGENT | UNLIQUIDATED | AMOUNT<br>OF<br>CLAIM |
|---|--|--|------------|--------------|-----------------------|
|   |  |  |            |              |                       |
| ACCOUNT NO.   |  | Consideration: Medical Services  |            |              | Notice Only           |
| Adnan K. Nassur, MD<br>9173 Route 30<br>Irwin, PA 15642   |  |  |            |              |                       |
| ACCOUNT NO.   |  | Consideration: Personal loan   |            |              | Notice Only           |
| Allegheny Valley Credit Union<br>250 William Pitt Way<br>Pittsburgh, PA 15238                                 |  |  |            |              |                       |
| ACCOUNT NO.   |  | Consideration: Medical Services  |            |              | Notice Only           |
| Bruce A. Matthews, DMD<br>1225 S. Main Street, Suite 106<br>Greensburg, PA 15601                              | W  |  |            |              |                       |
| ACCOUNT NO. xxxx-xxxx-xxxx-0778   |  | Consideration: Credit card debt  |            |              | Notice Only           |
| Capital One Bank<br>6125 Lakeview Road, Suite 800<br>Charlotte, NC 28269                                      |  |  |            |              |                       |
| Subtotal >  |  |  | \$         | 0.00         |                       |
| Total >   |  |  | \$         |              |                       |

8 continuation sheets attached

Subtotal &gt; \$ 0.00

Total &gt;

\$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Richard M. Critchfield & Catherine M. Critchfield,  
DebtorCase No. 15-24397-GLT  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br><i>(See instructions above.)</i>            | CODEBTOR<br><br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | AMOUNT<br>OF<br>CLAIM |
|---|--|---|------------|--------------|-----------------------|
|   |  |   | DISPUTED   |              |                       |
| ACCOUNT NO. xxxx7578<br><br>CBCS<br>P.O. Box 2724<br>Columbus, OH 43216   |  | Incurred: 2015<br>Consideration: Medical Services   |            |              | Notice Only           |
| ACCOUNT NO. xxxx8706<br><br>CBCS<br>P.O. Box 2724<br>Columbus, OH 43216   |  | Incurred: 2015<br>Consideration: Medical Services   |            |              | Notice Only           |
| ACCOUNT NO. xxxx4589<br><br>CBCS<br>P.O. Box 2724<br>Columbus, OH 43216   |  | Incurred: 2015<br>Consideration: Medical Services   |            |              | Notice Only           |
| ACCOUNT NO. xxxx2435<br><br>CBCS<br>P.O. Box 2724<br>Columbus, OH 43216   |  | Incurred: 2015<br>Consideration: Medical Services   |            |              | Notice Only           |
| ACCOUNT NO.<br><br>CBCS<br>P.O. Box 69<br>Columbus, OH 43216  |  | Consideration: Medical Services<br>Excela Health  |            |              | Notice Only           |
| Sheet no. <u>1</u> of <u>8</u> continuation sheets attached<br>to Schedule of Creditors Holding Unsecured<br>Nonpriority Claims |  |   | Subtotal > |              | \$ <u>0.00</u>        |
|   |  |   | Total >    |              | \$ <u></u>            |

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Richard M. Critchfield & Catherine M. Critchfield,  
DebtorCase No. 15-24397-GLT  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br><i>(See instructions above.)</i>                        | CODEBTOR | HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | AMOUNT<br>OF<br>CLAIM |
|---|----------|--------------------------------------|---|------------|--------------|-----------------------|
|   |          |                                      |   | DISPUTED   |              |                       |
| ACCOUNT NO. xxxxxxxxx000-4<br><br>Columbia Gas<br>200 Civic Center Drive, 11th Floor<br>Columbus, OH 43215                                  |          | J                                    | Consideration: Heating Bill   |            |              | Notice Only           |
| ACCOUNT NO. xxxxxxxxxxxxxxx0005<br><br>Columbia Gas<br>c/o Alliance One Rec. Mgt., Inc<br>1684 Woodlands Dr., Suite 150<br>Maumee, OH 43537 |          |                                      | Consideration: Heating Bill   |            |              | Notice Only           |
| ACCOUNT NO.<br><br>Excela Health<br>520 Jefferson Avenue<br>Jeannette, PA 15644   |          |                                      | Incurred: 2015<br>Consideration: Medical Services   |            |              | Notice Only           |
| ACCOUNT NO. xxxx3 EHO<br><br>Excela Health<br>532 W. Pittsburgh Street<br>Greensburg, PA 15601  |          | W                                    | Consideration: Medical Services   |            |              | Notice Only           |
| ACCOUNT NO.<br><br>FirstEnergy Corp.<br>1003 Broad Street, Suite 100<br>Johnstown, PA 15906-2445  |          |                                      | Consideration: Electric Bill  |            |              | Notice Only           |
| Sheet no. <u>2</u> of <u>8</u> continuation sheets attached<br>to Schedule of Creditors Holding Unsecured<br>Nonpriority Claims             |          |                                      |   | Subtotal > | \$ 0.00      |                       |
|   |          |                                      |   | Total >    | \$           |                       |

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Richard M. Critchfield & Catherine M. Critchfield,  
DebtorCase No. 15-24397-GLT  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br><i>(See instructions above.)</i>                  | CODEBTOR<br><br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | AMOUNT<br>OF<br>CLAIM |
|---|--|---|------------|--------------|-----------------------|
|   |  |   | DISPUTED   |              |                       |
| ACCOUNT NO. XXXXXX0377  |  | Incurred: 2015<br>Consideration: Medical Services   |            |              | Notice Only           |
| Frick Hospital<br>134 Industrial park Drive<br>Suite 2400<br>Greensburg, PA 15601   |  |   |            |              |                       |
| ACCOUNT NO. 48365949  |  | Consideration: Medical Services   |            |              | Notice Only           |
| Jeannette Primary Care Group<br>600 Jefferson Avenue<br>Jeannette, PA 15644   |  |   |            |              |                       |
| ACCOUNT NO. 2612-1  |  | Consideration: Medical Services   |            |              | Notice Only           |
| Jill M. Constantine, M.D.<br>601 Michigan Avenue<br>Jeannette, PA 15644   |  |   |            |              |                       |
| ACCOUNT NO.   |  | Consideration: Medical Services   |            |              | Notice Only           |
| Laboratory Corp of America<br>c/o American Medical Collection<br>Agency<br>2269 S. Saw Mill River Road, Bldg. 3<br>Elmsford, NY 10523 |  |   |            |              |                       |
| ACCOUNT NO.   |  | Consideration: Medical Services   |            |              | Notice Only           |
| Laboratory Corp of America<br>c/o LCA Collections<br>P.O. Box 2240<br>Burlington, NC 27216-2240                                       | W  |   |            |              |                       |
| Sheet no. <u>3</u> of <u>8</u> continuation sheets attached<br>to Schedule of Creditors Holding Unsecured<br>Nonpriority Claims       |  |   | Subtotal > | \$ 0.00      |                       |
|   |  |   | Total >    | \$           |                       |

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Richard M. Critchfield & Catherine M. Critchfield,  
DebtorCase No. 15-24397-GLT  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br><i>(See instructions above.)</i>            | CODEBTOR<br><br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | AMOUNT<br>OF<br>CLAIM |
|---|--|---|------------|--------------|-----------------------|
|   |  |   | DISPUTED   |              |                       |
| ACCOUNT NO.   |  | Consideration: Medical Services   |            |              |                       |
| Laboratory Corp of America<br>P.O. Box 2240<br>Burlington, NC 27216-2240  |  |   |            |              | Notice Only           |
| ACCOUNT NO. 5161  |  | Incurred: 2015<br>Consideration: Medical Services   |            |              |                       |
| M. Munir Zatoon, MD<br>1027 W. Main Street<br>Mt. Pleasant, PA 15666  |  |   |            |              | Notice Only           |
| ACCOUNT NO.   |  | Incurred: 2015<br>Consideration: Medical Services   |            |              |                       |
| MedExpress Billing<br>P.O. Box 1400<br>Belfast, MD 04915  |  |   |            |              | Notice Only           |
| ACCOUNT NO.   |  | Consideration: Medical Services   |            |              |                       |
| Medical Bureau<br>4227 Steubenville Pike<br>Pittsburgh, PA 15205  |  |   |            |              | Notice Only           |
| ACCOUNT NO.   |  | Consideration: Water Bill   |            |              |                       |
| Municipal Auth. of Westmoreland Co.<br>P.O. Box 800<br>Greensburg, PA 15601   |  |   |            |              | Notice Only           |
| Sheet no. <u>4</u> of <u>8</u> continuation sheets attached<br>to Schedule of Creditors Holding Unsecured<br>Nonpriority Claims |  |   | Subtotal > |              | \$ <u>0.00</u>        |
|   |  |   | Total >    |              | \$ <u></u>            |

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Richard M. Critchfield & Catherine M. Critchfield,  
DebtorCase No. 15-24397-GLT  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br><i>(See instructions above.)</i>            | CODEBTOR | HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | AMOUNT<br>OF<br>CLAIM |
|---|----------|--------------------------------------|---|------------|--------------|-----------------------|
|   |          |                                      |   | DISPUTED   |              |                       |
| ACCOUNT NO.   |          |                                      | Consideration: Medical Services   |            |              |                       |
| Oak Hill Dental<br>P.O. Box 425<br>Rillton PA 15678   |          |                                      |   |            |              | Notice Only           |
| ACCOUNT NO.   |          |                                      | Consideration: Refuse Bill  |            |              |                       |
| Onyx<br>c/o Ascension Capital Group<br>P.O. Box 201347<br>Arlington, TX 76006   |          |                                      |   |            |              | Notice Only           |
| ACCOUNT NO. 16524   |          |                                      | Consideration: Medical Services   |            |              |                       |
| Professional X-Ray<br>585 Rugh Street, Suite 202<br>Greensburg, PA 15601  |          |                                      |   |            |              | Notice Only           |
| ACCOUNT NO.   |          |                                      | Consideration: Heating Bill   |            |              |                       |
| T.W. Phillips Gas and Oil Co.<br>c/o Peoples<br>375 North Shore Drive<br>Suite 600<br>Pittsburgh, PA 15212                      |          |                                      |   |            |              | Notice Only           |
| ACCOUNT NO.   |          |                                      |   |            |              |                       |
| Veolia<br>c/o RMS Bankruptcy Recovery<br>Services<br>P.O. Box 5126<br>Timonium, MD 21094  |          |                                      |   |            |              | Notice Only           |
| Sheet no. <u>5</u> of <u>8</u> continuation sheets attached<br>to Schedule of Creditors Holding Unsecured<br>Nonpriority Claims |          |                                      |   | Subtotal > | \$           | 0.00                  |
|   |          |                                      |   | Total >    | \$           |                       |

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Richard M. Critchfield & Catherine M. Critchfield,  
DebtorCase No. 15-24397-GLT  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br><i>(See instructions above.)</i>            | CODEBTOR<br><br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | AMOUNT<br>OF<br>CLAIM |
|---|--|---|------------|--------------|-----------------------|
|   |  |   | DISPUTED   |              |                       |
| ACCOUNT NO.   |  | Consideration: Telephone Bill   |            |              |                       |
| Verizon Wireless<br>P.O. Box 3397<br>Bloomington, IL 61702  |  |   |            |              | Notice Only           |
| ACCOUNT NO. xxxxxxxx6249  |  | Incurred: 2015<br>Consideration: Electric Bill  |            |              |                       |
| West Penn Power<br>P.O. Box 3615<br>Akron, OK 44308   |  |   |            |              | Notice Only           |
| ACCOUNT NO. 3532364   | W  | Consideration: Medical Services   |            |              |                       |
| Western Pa. Anes. Assoc., Ltd.<br>4815 Liberty Avenue<br>Pittsburgh, PA 15224   |  |   |            |              | Notice Only           |
| ACCOUNT NO. 3794  | W  | Consideration: Medical Services   |            |              |                       |
| Westmoreland Center Internal Med.<br>501 W. Otterman Street, Suite B<br>Greensburg, PA 15601                                    |  |   |            |              | Notice Only           |
| ACCOUNT NO.   | J  | Consideration: Taxes  |            |              |                       |
| Westmoreland Co. TCB<br>406 Courthouse Square<br>Greensburg, PA 15601   |  |   |            |              | Notice Only           |
| Sheet no. <u>6</u> of <u>8</u> continuation sheets attached<br>to Schedule of Creditors Holding Unsecured<br>Nonpriority Claims |  |   | Subtotal > | \$ 0.00      |                       |
|   |  |   | Total >    | \$           |                       |

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Richard M. Critchfield & Catherine M. Critchfield,  
DebtorCase No. 15-24397-GLT  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br><i>(See instructions above.)</i>            | CODEBTOR | HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | AMOUNT<br>OF<br>CLAIM |
|---|----------|--------------------------------------|---|------------|--------------|-----------------------|
|   |          |                                      |   | DISPUTED   |              |                       |
| ACCOUNT NO.   |          |                                      | Consideration: Medical Services   |            |              |                       |
| Westmoreland Hospital<br>532 W. Pittsburgh Street<br>Greensburg, PA 15601   | W        |                                      |   |            |              | Notice Only           |
| ACCOUNT NO. xxxxxx0297  |          |                                      | Incurred: 2015<br>Consideration: Medical Services   |            |              |                       |
| Westmoreland Hospital<br>532 W. Pittsburgh Street<br>Greensburg, PA 15601   |          |                                      |   |            |              | Notice Only           |
| ACCOUNT NO. 2333855   |          |                                      | Consideration: Medical Services   |            |              |                       |
| Westmoreland Reg. Hospital<br>c/o Diversified Collections, Inc.<br>1165 Garden Street, P.O. Box 200<br>Greensburg, PA 15601     | W        |                                      |   |            |              | Notice Only           |
| ACCOUNT NO. x1371   |          |                                      | Incurred: 2015<br>Consideration: Medical Services   |            |              |                       |
| Westmoreland Sleep Med<br>426 Pellis Road<br>Greensburg, PA 15601   |          |                                      |   |            |              | Notice Only           |
| ACCOUNT NO.   |          |                                      | Incurred: 2015<br>Consideration: Medical Services   |            |              |                       |
| Westmoreland Sleep Med<br>c/o DME, Inc.<br>246 Pellis Road<br>Greensburg, PA 15601  |          |                                      |   |            |              | Notice Only           |
| Sheet no. <u>7</u> of <u>8</u> continuation sheets attached<br>to Schedule of Creditors Holding Unsecured<br>Nonpriority Claims |          |                                      |   | Subtotal > | \$           | 0.00                  |
|   |          |                                      |   | Total >    | \$           |                       |

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

B6F (Official Form 6F) (12/07) - Cont.

In re Richard M. Critchfield & Catherine M. Critchfield,  
DebtorCase No. 15-24397-GLT  
(If known)**SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br><i>(See instructions above.)</i>            | CODEBTOR<br><br>HUSBAND, WIFE, JOINT<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM.<br>IF CLAIM IS SUBJECT TO SETOFF, | CONTINGENT | UNLIQUIDATED | AMOUNT<br>OF<br>CLAIM |
|---|--|---|------------|--------------|-----------------------|
|   |  |   | DISPUTED   |              |                       |
| ACCOUNT NO.   |  | Consideration: Per Capita Taxes   |            |              |                       |
| Yough SD/Sewickley Twp.<br>c/o Berkheimer Tax Administrator<br>50 North 7th Street<br>Bangor, PA 18013-0912                     |  |   |            |              | Notice Only           |
| ACCOUNT NO.   |  | Consideration: Income Taxes   |            |              |                       |
| Yough SD/Sewickley Twp.<br>c/o Berkheimer Tax Administrator<br>50 North 7th Street<br>Bangor, PA 18013-0912                     |  |   |            |              | Notice Only           |
| ACCOUNT NO.   |  |   |            |              |                       |
| ACCOUNT NO.   |  |   |            |              |                       |
| ACCOUNT NO.   |  |   |            |              |                       |
| ACCOUNT NO.   |  |   |            |              |                       |
| Sheet no. <u>8</u> of <u>8</u> continuation sheets attached<br>to Schedule of Creditors Holding Unsecured<br>Nonpriority Claims |  |   | Subtotal ➤ |              | \$ 0.00               |
|   |  |   | Total ➤    |              | \$ 0.00               |

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

In re Richard M. Critchfield & Catherine M. Critchfield  
Debtor

Case No. 15-24397-GLT  
(if known)

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT. | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
|--|--|
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In re Richard M. Critchfield & Catherine M. Critchfield  
Debtor

Case No. 15-24397-GLT  
(if known)

## **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|------------------------------|
|                              |                              |

Fill in this information to identify your case:

Debtor 1 **Richard M. Critchfield**  
 First Name  Middle Name  Last Name   
 Debtor 2 **Catherine M. Critchfield**  
 (Spouse, if filing) First Name  Middle Name  Last Name   
 United States Bankruptcy Court for the: **Western** District of **PA**  
 Case number  (If known) **15-24397-GLT**

Check if this is:

An amended filing  
 A supplement showing post-petition chapter 13 income as of the following date:  
 MM / DD / YYYY

Official Form B 6l

**Schedule I: Your Income**

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment**

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

**Employment status**

**Debtor 1**

**Debtor 2 or non-filing spouse**

Employed  
 Not employed

Employed  
 Not employed

**Occupation**

**Employer's name**

**Employer's address**

Number  Street

Number  Street

City  State  ZIP Code

City  State  ZIP Code

**How long employed there?**

**Part 2: Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

**For Debtor 1**

**For Debtor 2 or non-filing spouse**

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$  0.00 \$  0.00

3. Estimate and list monthly overtime pay.

3. + \$  0.00 + \$  0.00

4. Calculate gross income. Add line 2 + line 3.

4. \$  0.00 \$  0.00

Richard M. Critchfield

15-24397-GLT

Debtor 1

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

|  | <b>For Debtor 1</b>    | <b>For Debtor 2 or non-filing spouse</b> |
|--|------------------------|--|
| <b>Copy line 4 here.....</b>   | → 4. \$ <u>0.00</u>    | \$ <u>0.00</u>                           |
| <b>5. List all payroll deductions:</b>   |                        |  |
| 5a. <b>Tax, Medicare, and Social Security deductions</b>   | 5a. \$ <u>0.00</u>     | \$ <u>0.00</u>                           |
| 5b. <b>Mandatory contributions for retirement plans</b>  | 5b. \$ <u>0.00</u>     | \$ <u>0.00</u>                           |
| 5c. <b>Voluntary contributions for retirement plans</b>  | 5c. \$ <u>0.00</u>     | \$ <u>0.00</u>                           |
| 5d. <b>Required repayments of retirement fund loans</b>  | 5d. \$ <u>0.00</u>     | \$ <u>0.00</u>                           |
| 5e. <b>Insurance</b>   | 5e. \$ <u>0.00</u>     | \$ <u>0.00</u>                           |
| 5f. <b>Domestic support obligations</b>  | 5f. \$ <u>0.00</u>     | \$ <u>0.00</u>                           |
| 5g. <b>Union dues</b>  | 5g. \$ <u>0.00</u>     | \$ <u>0.00</u>                           |
| 5h. <b>Other deductions. Specify: ;</b>  | 5h. + \$ <u>0.00</u>   | + \$ <u>0.00</u>                         |
| <b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.   | 6. \$ <u>0.00</u>      | \$ <u>0.00</u>                           |
| <b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.  | 7. \$ <u>0.00</u>      | \$ <u>0.00</u>                           |
| <b>8. List all other income regularly received:</b>  |                        |  |
| 8a. <b>Net income from rental property and from operating a business, profession, or farm</b>  | 8a. \$ <u>0.00</u>     | \$ <u>0.00</u>                           |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  |                        |  |
| 8b. <b>Interest and dividends</b>  | 8b. \$ <u>0.00</u>     | \$ <u>0.00</u>                           |
| 8c. <b>Family support payments that you, a non-filing spouse, or a dependent regularly receive</b>   | 8c. \$ <u>0.00</u>     | \$ <u>0.00</u>                           |
| Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   |                        |  |
| 8d. <b>Unemployment compensation</b>   | 8d. \$ <u>2,167.00</u> | \$ <u>0.00</u>                           |
| 8e. <b>Social Security</b>   | 8e. \$ <u>1,875.00</u> | \$ <u>0.00</u>                           |
| 8f. <b>Other government assistance that you regularly receive</b>  | 8f. \$ <u>0.00</u>     | \$ <u>0.00</u>                           |
| Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. |                        |  |
| Specify: ;   |                        |  |
| 8g. <b>Pension or retirement income</b>  | 8g. \$ <u>0.00</u>     | \$ <u>0.00</u>                           |
| 8h. <b>Other monthly income. Specify: ;</b>  | 8h. + \$ <u>0.00</u>   | + \$ <u>0.00</u>                         |
| <b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.   | 9. \$ <u>4,042.00</u>  | \$ <u>0.00</u>                           |
| <b>10. Calculate monthly income.</b> Add line 7 + line 9.  | 10. \$ <u>4,042.00</u> | + \$ <u>0.00</u> = \$ <u>4,042.00</u>    |
| <b>11. State all other regular contributions to the expenses that you list in Schedule J.</b>  |                        |  |
| Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.   |                        |  |
| Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  |                        |  |
| Specify: ;   | 11. + \$ <u>0.00</u>   |  |
| <b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income.   |                        |  |
| Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies   | 12. \$ <u>4,042.00</u> |  |
| <b>Combined monthly income</b>   |                        |  |
| <b>13. Do you expect an increase or decrease within the year after you file this form?</b>   |                        |  |
| <input checked="" type="checkbox"/> No.  |                        |  |
| <input type="checkbox"/> Yes. Explain: _____   |                        |  |

Fill in this information to identify your case:

|   |                          |                |
|---|--------------------------|----------------|
| Debtor 1                                | Richard M. Critchfield   |                |
|   | First Name               | Middle Name    |
| Debtor 2<br>(Spouse, if filing)         | Catherine M. Critchfield |                |
|   | First Name               | Middle Name    |
| United States Bankruptcy Court for the: | Western                  | District of PA |
| Case number<br>(if known)               | 15-24397-GLT             |                |

Check if this is:

An amended filing  
 A supplement showing post-petition chapter 13 expenses as of the following date:  
 06/08/2014  
 MM / DD / YYYY  
 A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

## Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household**

1. Is this a joint case?

No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?  
 No  
 Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

No  
 Yes. Fill out this information for each dependent.....

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

No  
 Yes  
 No  
 Yes  
 No  
 Yes  
 No  
 Yes  
 No  
 Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

No  
 Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 6I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

| Your expenses |          |
|---------------|----------|
| 4.            | \$ 0.00  |
| 4a.           | \$ 0.00  |
| 4b.           | \$ 67.00 |
| 4c.           | \$ 50.00 |
| 4d.           | \$ 0.00  |

If not included in line 4:

4a. Real estate taxes  
 4b. Property, homeowner's, or renter's insurance  
 4c. Home maintenance, repair, and upkeep expenses  
 4d. Homeowner's association or condominium dues

Debtor 1 Richard M. Critchfield  
 First Name Richard Middle Name M. Last Name Critchfield

Case number (if known) 15-24397-GLT

**5. Additional mortgage payments for your residence**, such as home equity loans

**Your expenses**  
 5. \$ 0.00

**6. Utilities:**

6a. Electricity, heat, natural gas  
 6b. Water, sewer, garbage collection  
 6c. Telephone, cell phone, Internet, satellite, and cable services  
 6d. Other. Specify: Cable TV

6a. \$ 600.00  
 6b. \$ 40.00  
 6c. \$ 200.00  
 6d. \$ 100.00  
 7. \$ 500.00  
 8. \$ 0.00  
 9. \$ 50.00  
 10. \$ 25.00  
 11. \$ 400.00

**7. Food and housekeeping supplies**

**8. Childcare and children's education costs**

**9. Clothing, laundry, and dry cleaning**

**10. Personal care products and services**

**11. Medical and dental expenses**

**12. Transportation.** Include gas, maintenance, bus or train fare.

Do not include car payments.

12. \$ 200.00  
 13. \$ 0.00  
 14. \$ 0.00

**15. Insurance.**

Do not include insurance deducted from your pay or included in lines 4 or 20.

15a. Life insurance  
 15b. Health insurance  
 15c. Vehicle insurance  
 15d. Other insurance. Specify: \_\_\_\_\_

15a. \$ 0.00  
 15b. \$ 0.00  
 15c. \$ 200.00  
 15d. \$ 0.00

**16. Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20.  
 Specify: Real Estate Taxes

16. \$ 200.00

**17. Installment or lease payments:**

17a. Car payments for Vehicle 1  
 17b. Car payments for Vehicle 2  
 17c. Other. Specify: \_\_\_\_\_  
 17d. Other. Specify: \_\_\_\_\_

17a. \$ 0.00  
 17b. \$ 0.00  
 17c. \$ 0.00  
 17d. \$ 0.00

**18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I).**

18. \$ 0.00

**19. Other payments you make to support others who do not live with you.**

<sup>3</sup>  Specify: \_\_\_\_\_

19. \$ 0.00

**20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**

20a. Mortgages on other property  
 20b. Real estate taxes  
 20c. Property, homeowner's, or renter's insurance  
 20d. Maintenance, repair, and upkeep expenses  
 20e. Homeowner's association or condominium dues

20a. \$ 0.00  
 20b. \$ 0.00  
 20c. \$ 0.00  
 20d. \$ 0.00  
 20e. \$ 0.00

Debtor 1 Richard M. Critchfield  
First Name Middle Name Last Name

Case number (if known) 15-24397-GLT

21. **Other.** Specify: \_\_\_\_\_ 0.00

22. **Your monthly expenses.** Add lines 4 through 21.

The result is your monthly expenses.

\$ 2,632.00

23. **Calculate your monthly net income.**

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23b. Copy your monthly expenses from line 22 above.

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

\$ 4,042.00

-\$ 2,632.00

\$ 1,410.00

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here:

**B6 Summary (Official Form 6 - Summary) (12/14)**

**United States Bankruptcy Court**  
Western District of Pennsylvania

Richard M. Critchfield & Catherine M. Critchfield

In re

Debtor

Case No. 15-24397-GLT

Chapter 13

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

**AMOUNTS SCHEDULED**

| NAME OF SCHEDULE  | ATTACHED<br>(YES/NO) | NO. OF SHEETS | ASSETS        | LIABILITIES   | OTHER       |
|---|----------------------|---------------|---------------|---------------|-------------|
| A - Real Property   | YES                  | 1             | \$ 125,000.00 |               |             |
| B - Personal Property   | YES                  | 3             | \$ 11,500.00  |               |             |
| C - Property Claimed<br>as exempt   | YES                  | 1             |               |               |             |
| D - Creditors Holding<br>Secured Claims   | YES                  | 1             |               | \$ 110,194.00 |             |
| E - Creditors Holding Unsecured<br>Priority Claims<br>(Total of Claims on Schedule E) | YES                  | 2             |               | \$ 0.00       |             |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                                 | YES                  | 9             |               | \$ 0.00       |             |
| G - Executory Contracts and<br>Unexpired Leases                                       | YES                  | 1             |               |               |             |
| H - Codebtors   | YES                  | 1             |               |               |             |
| I - Current Income of<br>Individual Debtor(s)   | YES                  | 2             |               |               | \$ 4,042.00 |
| J - Current Expenditures of Individual<br>Debtors(s)                                  | YES                  | 3             |               |               | \$ 2,632.00 |
| <b>TOTAL</b>  |                      | 24            | \$ 136,500.00 | \$ 110,194.00 |             |

# United States Bankruptcy Court

Western District of Pennsylvania

In re Richard M. Critchfield & Catherine M. Critchfield  
Debtor

Case No. 15-24397-GLT  
Chapter 13

## **STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. §101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

| <b>Type of Liability</b>  | <b>Amount</b>  |
|---|----------------|
| Domestic Support Obligations (from Schedule E)  | \$ 0.00        |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | \$ 0.00        |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ 0.00        |
| Student Loan Obligations (from Schedule F)  | \$ 0.00        |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E                   | \$ 0.00        |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | \$ 0.00        |
| <b>TOTAL</b>  | <b>\$ 0.00</b> |

**State the Following:**

|   |             |
|---|-------------|
| Average Income (from Schedule I, Line 12)   | \$ 4,042.00 |
| Average Expenses (from Schedule J, Line 22)   | \$ 2,632.00 |
| Current Monthly Income (from Form 22A-1 Line 11; <b>OR</b> , Form 22B Line 14; <b>OR</b> , Form 22C-1 Line 14 ) | \$ 4,198.00 |

**State the Following:**

|  |         |
|--|---------|
| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column               | \$ 0.00 |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column             | \$ 0.00 |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | \$ 0.00 |
| 4. Total from Schedule F   | \$ 0.00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               | \$ 0.00 |

**B6 (Official Form 6 - Declaration) (12/07)**

Richard M. Critchfield & Catherine M. Critchfield

In re \_\_\_\_\_  
**Debtor**

Case No. 15-24397-GLT

(If known)

**DECLARATION CONCERNING DEBTOR'S SCHEDULES**

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 26 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date 12/26/2015

Signature: /s/ Richard M. Critchfield  
Debtor

Date 12/26/2015

Signature: /s/ Catherine M. Critchfield  
(Joint Debtor, if any)

[If joint case, both spouses must sign.]

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any,  
of Bankruptcy Petition Preparer

Social Security No.  
(Required by 11 U.S.C. § 110.)

*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.*

Address \_\_\_\_\_

X \_\_\_\_\_  
Signature of Bankruptcy Petition Preparer

Date \_\_\_\_\_

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

*If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.*

*A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.*

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, the \_\_\_\_\_ [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the \_\_\_\_\_ [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date \_\_\_\_\_

Signature: \_\_\_\_\_

[Print or type name of individual signing on behalf of debtor.]

*[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]*

*Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.*

In Re Richard M. Critchfield & Catherine M. CritchfieldCase No. 15-24397-GLT  
(if known)

## STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

## DEFINITIONS

*"In business."* A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

*"Insider."* The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

**1. Income from employment or operation of business**

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

|                          | AMOUNT      | SOURCE                        |
|--------------------------|-------------|-------------------------------|
| None                     |             |                               |
| <input type="checkbox"/> |             |                               |
| 2015(db)                 | \$34,251.00 | Employment/Unemployment Comp. |
| 2014(db)                 | \$36,000.00 | Employment                    |
| 2013(db)                 | \$36,000.00 | Employment                    |
| 2015(jdb)                | \$0.00      |                               |
| 2014(jdb)                | \$0.00      |                               |
| 2013(jdb)                | \$0.00      |                               |

**2. Income other than from employment or operation of business**

None  State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

|           | AMOUNT      | SOURCE |
|-----------|-------------|--------|
| 2014 (db) | \$22,500.00 | SS     |
| 2013(db)  | \$22,500.00 | SS     |
| 2014(jdb) | \$0.00      |        |
| 2014(jdb) | \$0.00      |        |

**3. Payments to creditors**

None

*Complete a. or b., as appropriate, and c.*

*a. Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR | DATES OF PAYMENTS | AMOUNT PAID | AMOUNT STILL OWING |
|------------------------------|-------------------|-------------|--------------------|
|                              |                   |             |                    |

None  *b. Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

*\*Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after date of adjustment.*

| NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR | DATES OF PAYMENTS | AMOUNT PAID | AMOUNT STILL OWING |
|---|-------------------|-------------|--------------------|
|   |                   |             |                    |

None



c. *All debtors:* List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR<br>AND RELATIONSHIP TO DEBTOR | DATES OF<br>PAYMENTS | AMOUNT PAID | AMOUNT STILL<br>OWING |
|--|----------------------|-------------|-----------------------|
|--|----------------------|-------------|-----------------------|

**4. Suits and administrative proceedings, executions, garnishments and attachments**

None



a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| CAPTION OF SUIT<br>AND CASE NUMBER  | NATURE OF PROCEEDING | COURT OR<br>AGENCY AND LOCATION       | STATUS OR<br>DISPOSITION       |
|---|----------------------|---------------------------------------|--------------------------------|
| CIT Group vs. Richard<br>M. Critchfield and<br>Catherine M.<br>Critchfield<br>No. 1943 of 12004 | Foreclosure          | Westmoreland Co CCP<br>Greensburg, PA | Stayed by these<br>proceedings |

None



b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF<br>PERSON FOR WHOSE BENEFIT<br>PROPERTY WAS SEIZED | DATE OF<br>SEIZURE | DESCRIPTION AND<br>VALUE OF PROPERTY |
|--|--------------------|--------------------------------------|
|--|--------------------|--------------------------------------|

**5. Repossessions, foreclosures and returns**

None



List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND<br>ADDRESS OF<br>CREDITOR OR SELLER | DATE OF REPOSESSION,<br>FORECLOSURE SALE,<br>TRANSFER OR RETURN | DESCRIPTION AND<br>VALUE OF PROPERTY |
|--|---|--------------------------------------|
|--|---|--------------------------------------|

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**6. Assignments and Receiverships**

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND<br>ADDRESS OF<br>ASSIGNEE          | DATE OF ASSIGNMENT   | TERMS OF<br>ASSIGNMENT<br>OR SETTLEMENT |                                      |
|---|--|---|--------------------------------------|
| None<br><input checked="" type="checkbox"/> | b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) |   |                                      |
| NAME AND<br>ADDRESS OF<br>CUSTODIAN         | NAME AND LOCATION<br>OF COURT CASE TITLE<br>& NUMBER   | DATE OF<br>ORDER                        | DESCRIPTION AND<br>VALUE OF PROPERTY |
|   |  |   |                                      |

**7. Gifts**

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND<br>ADDRESS OF<br>PERSON OR ORGANIZATION | RELATIONSHIP<br>TO DEBTOR, IF ANY | DATE OF<br>GIFT | DESCRIPTION AND<br>VALUE OF GIFT |
|--|-----------------------------------|-----------------|----------------------------------|
|  |                                   |                 |                                  |

**8. Losses**

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| DESCRIPTION<br>AND VALUE<br>OF PROPERTY | DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS<br>WAS COVERED IN WHOLE OR IN PART BY<br>INSURANCE, GIVE PARTICULARS | DATE OF<br>LOSS |
|---|---|-----------------|
|   |   |                 |

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**9. Payments related to debt counseling or bankruptcy**

None  List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

| NAME AND ADDRESS OF PAYEE | DATE OF PAYMENT,<br>NAME OF PAYOR IF<br>OTHER THAN DEBTOR | AMOUNT OF MONEY OR<br>DESCRIPTION AND<br>VALUE OF PROPERTY |
|---------------------------|---|--|
|---------------------------|---|--|

|  |            |            |
|--|------------|------------|
| Michael S. Geisler<br>Michael S. Geisler,<br>Attorney-at-Law<br>201 Penn Center Blvd., Suite 524<br>Pittsburgh, PA 15235 | 11/30/2015 | \$1,200.00 |
|--|------------|------------|

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**10. Other transfers**

None  a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF TRANSFeree,<br>RELATIONSHIP TO DEBTOR | DATE | DESCRIBE PROPERTY<br>TRANSFERRED AND<br>VALUE RECEIVED |
|---|------|--|
|---|------|--|

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None

| NAME OF TRUST OR OTHER DEVICE | DATE(S) OF<br>TRANSFER(S) | AMOUNT OF MONEY OR<br>DESCRIPTION AND<br>VALUE OF PROPERTY OR<br>DEBTOR'S INTEREST IN PROPERTY |
|-------------------------------|---------------------------|--|
|-------------------------------|---------------------------|--|

**11. Closed financial accounts**

None  List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND<br>ADDRESS OF<br>INSTITUTION | TYPE OF ACCOUNT, LAST FOUR<br>DIGITS OF ACCOUNT NUMBER,<br>AND AMOUNT OF FINAL BALANCE | AMOUNT AND<br>DATE OF SALE<br>OR CLOSING |
|---------------------------------------|--|--|
|---------------------------------------|--|--|

**12. Safe deposit boxes**

None  List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND<br>ADDRESS OF BANK<br>OR OTHER DEPOSITORY | NAMES AND ADDRESSES OF<br>THOSE WITH ACCESS TO BOX<br>OR DEPOSITORY | DESCRIPTION OF<br>CONTENTS | DATE OF<br>TRANSFER OR<br>SURRENDER, IF ANY |
|--|---|----------------------------|---|
|--|---|----------------------------|---|

**13. Setoffs**

None  List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR | DATE<br>OF<br>SETOFF | AMOUNT<br>OF<br>SETOFF |
|------------------------------|----------------------|------------------------|
|------------------------------|----------------------|------------------------|

**14. Property held for another person**

None  List all property owned by another person that the debtor holds or controls.

| NAME AND<br>ADDRESS OF OWNER | DESCRIPTION AND<br>VALUE OF PROPERTY | LOCATION OF PROPERTY |
|------------------------------|--------------------------------------|----------------------|
|------------------------------|--------------------------------------|----------------------|

**15. Prior address of debtor**

None



If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

---

ADDRESS

NAME USED

DATES OF OCCUPANCY

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**16. Spouses and Former Spouses**

None



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

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**17. Environmental Sites**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

---

None



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

| SITE NAME<br>AND ADDRESS | NAME AND ADDRESS<br>OF GOVERNMENTAL UNIT | DATE OF<br>NOTICE | ENVIRONMENTAL<br>LAW |
|--------------------------|--|-------------------|----------------------|
|--------------------------|--|-------------------|----------------------|

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b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None



| SITE NAME<br>AND ADDRESS | NAME AND ADDRESS<br>OF GOVERNMENTAL UNIT | DATE OF<br>NOTICE | ENVIRONMENTAL<br>LAW |
|--------------------------|--|-------------------|----------------------|
|--------------------------|--|-------------------|----------------------|

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None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.



NAME AND ADDRESS  
OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

**18. Nature, location and name of business**

None a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

| NAME | LAST FOUR DIGITS OF<br>SOCIAL-SECURITY OR<br>OTHER INDIVIDUAL<br>TAXPAYER-I.D. NO.<br>(ITIN)/ COMPLETE EIN | ADDRESS | NATURE OF BUSINESS | BEGINNING AND<br>ENDING DATES |
|------|--|---------|--------------------|-------------------------------|
|------|--|---------|--------------------|-------------------------------|

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

ADDRESS

**[Questions 19 - 25 are not applicable to this case]**

\* \* \* \* \*

*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

|      |            |                           |  |
|------|------------|---------------------------|--|
| Date | 12/26/2015 | Signature of Debtor       | /s/ Richard M. Critchfield<br>RICHARD M. CRITCHFIELD     |
| Date | 12/26/2015 | Signature of Joint Debtor | /s/ Catherine M. Critchfield<br>CATHERINE M. CRITCHFIELD |

0 continuation sheets attached

***Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §152 and 3571***

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**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110(c).)

*If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.*

Address

X

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

***A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.***

B 201B (Form 201B) (12/09)

**United States Bankruptcy Court  
Western District of Pennsylvania**

**In re** Richard M. Critchfield & Catherine M. Critchfield  
**Debtor**

**Case No.** 15-24397-GLT  
**(If known)**

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)  
UNDER § 342(b) OF THE BANKRUPTCY CODE**

**Certification of [Non-Attorney] Bankruptcy Petition Preparer**

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor the attached notice, as required by § 342(b) of the Bankruptcy Code

Printed name and title, if any, of Bankruptcy Petition Preparer  
Address:

---

Social Security number (If the bankruptcy petition  
preparer is not an individual, state the Social Security  
number of the officer, principal, responsible person,  
or partner of the bankruptcy petition preparer.)  
(Required by 11 U.S.C. § 110.)

X

Signature of Bankruptcy Petition Preparer or officer,  
Principal, responsible person, or partner whose Social  
Security number is provided above.

**Certification of the Debtor**

I, (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy  
Code

Richard M. Critchfield & Catherine M. Critchfield  
Printed Names(s) of Debtor(s)

X /s/ Richard M. Critchfield 12/26/2015  
Signature of Debtor Date

Case No. (if known) 15-24397-GLT

X /s/ Catherine M. Critchfield 12/26/2015  
Signature of Joint Debtor, (if any) Date

**Instructions:** Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has  
**NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by  
the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy  
petition preparers on page 3 of Form B1 also include this certification.

## UNITED STATES BANKRUPTCY COURT

### NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### **1. Services Available from Credit Counseling Agencies**

**With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis.** The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

**In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge.** The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### **2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors**

##### **Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335)**

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a “means test” designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny

your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

**Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)**

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

**Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)**

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

**Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)**

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

**3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials**

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at [http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure).

United States Bankruptcy Court  
Western District of Pennsylvania

In re Richard M. Critchfield & Catherine M. Critchfield

Case No. 15-24397-GLT

Chapter 13

Debtor(s)

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept ..... \$ 4,000.00

Prior to the filing of this statement I have received ..... \$ 1,200.00

Balance Due ..... \$ 2,800.00

2. The source of compensation paid to me was:

Debtor  Other (specify)

3. The source of compensation to be paid to me is:

Debtor  Other (specify)

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- [Other provisions as needed]

Debtor(s) counsel reserves the right to apply to the Court for the payment of fees earned in excess of the retainer. Debtor(s) counsel bills at the rate of \$300.00 per hour.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in the bankruptcy proceeding.

12/26/2015

Date

/s/ Michael S. Geisler

Signature of Attorney

Michael S. Geisler, Attorney-at-Law

Name of law firm

|   |                          |                           |
|---|--------------------------|---------------------------|
| Fill in this information to identify your case: |                          |                           |
| Debtor 1  | Richard M. Critchfield   | Last Name                 |
| First Name                                      | Middle Name              |                           |
| Debtor 2  | Catherine M. Critchfield | Last Name                 |
| (Spouse, if filing)                             | First Name               | Middle Name               |
| United States Bankruptcy Court for the:         | Western                  | District of PA<br>(State) |
| Case number<br>(If known)                       | 15-24397-GLT             |                           |

Check as directed in lines 17 and 21:

According to the calculations required by this Statement:

1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).

2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).

3. The commitment period is 3 years.

4. The commitment period is 5 years.

Check if this is an amended filing

## Official Form 22C-1

### Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

Not married. Fill out Column A, lines 2-11.

Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

|  | Column A<br>Debtor 1 | Column B<br>Debtor 2 or<br>non-filing spouse |
|--|----------------------|--|
| 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).   | \$ 4,198.00          | \$ 0.00                                      |
| 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.   | \$ 0.00              | \$ 0.00                                      |
| 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. | \$ 0.00              | \$ 0.00                                      |
| 5. Net income from operating a business, profession, or farm   |                      |  |
| Gross receipts (before all deductions)   | \$ 0.00              |  |
| Ordinary and necessary operating expenses  | - \$ 0.00            |  |
| Net monthly income from a business, profession, or farm  | \$ 0.00              | \$ 0.00                                      |
|  | <b>Copy here ➔</b>   |  |
| 6. Net income from rental and other real property  |                      |  |
| Gross receipts (before all deductions)   | \$ 0.00              |  |
| Ordinary and necessary operating expenses  | - \$ 0.00            |  |
| Net monthly income from rental or other real property  | \$ 0.00              | \$ 0.00                                      |
|  | <b>Copy here ➔</b>   |  |

Debtor 1 Richard M. Critchfield  
First Name Middle Name Last Name

Case number (if known) 15-24397-GLT

|                                       | Column A<br>Debtor 1 | Column B<br>Debtor 2 or<br>non-filing spouse |
|---------------------------------------|----------------------|--|
| 7. Interest, dividends, and royalties | \$ 0.00              | \$ 0.00                                      |
| 8. Unemployment compensation          | \$ 0.00              | \$ 0.00                                      |

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: 

For you ..... \$ 0.00  
For your spouse ..... \$ 0.00

|   |         |         |
|---|---------|---------|
| 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. | \$ 0.00 | \$ 0.00 |
|---|---------|---------|

## 10. Income from all other sources not listed above. Specify the source and amount.

Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c.

|   |                  |                  |
|---|------------------|------------------|
| 10a. ....                                       | \$ 0.00          | \$ 0.00          |
| 10b. ....                                       | \$ 0.00          | \$ 0.00          |
| 10c. Total amounts from separate pages, if any. | <b>+ \$ 0.00</b> | <b>+ \$ 0.00</b> |

11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

|                    |          |                |          |                    |
|--------------------|----------|----------------|----------|--------------------|
| <b>\$ 4,198.00</b> | <b>+</b> | <b>\$ 0.00</b> | <b>=</b> | <b>\$ 4,198.00</b> |
|--------------------|----------|----------------|----------|--------------------|

Total average monthly income

**Part 2: Determine How to Measure Your Deductions from Income**

12. Copy your total average monthly income from line 11. .... \$ 4,198.00

## 13. Calculate the marital adjustment. Check one:

You are not married. Fill in 0 in line 13d.  
 You are married and your spouse is filing with you. Fill in 0 in line 13d.  
 You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

In lines 13a-c, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 on line 13d.

|                 |                  |
|-----------------|------------------|
| 13a. ....       | \$ _____         |
| 13b. ....       | \$ _____         |
| 13c. ....       | \$ _____         |
| 13d. Total .... | <b>+ \$ 0.00</b> |

Copy here.  13d. — 0.00

14. Your current monthly income. Subtract line 13d from line 12. .... \$ 4,198.00

## 15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here  .... \$ 4,198.00

Multiply line 15a by 12 (the number of months in a year).

15b. The result is your current monthly income for the year for this part of the form. .... \$ 50,376.00

Debtor 1 Richard M. Critchfield  
First Name Middle Name Last NameCase number (if known) 15-24397-GLT

## 16. Calculate the median family income that applies to you. Follow these steps:

16a. Fill in the state in which you live. Pennsylvania16b. Fill in the number of people in your household. 216c. Fill in the median family income for your state and size of household..... 16c. \$ 57,870.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

## 17. How do the lines compare?

17a.  Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3.* Do NOT fill out *Calculation of Disposable Income* (Official Form 22C-2).

17b.  Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 22C-2).* On line 39 of that form, copy your current monthly income from line 14 above.

**Part 3: Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4)**18. Copy your total average monthly income from line 11. .... 18. \$ 4,198.00

19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13d.

If the marital adjustment does not apply, fill in 0 on line 19a.

19a. — \$ 0.0019b. \$ 4,198.00

## 20. Calculate your current monthly income for the year. Follow these steps:

20a. Copy line 19b..... 20a. \$ 4,198.00Multiply by 12 (the number of months in a year). x 1220b. The result is your current monthly income for the year for this part of the form. \$ 50,376.0020c. Copy the median family income for your state and size of household from line 16c. .... \$ 57,870.00

## 21. How do the lines compare?

Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years.* Go to Part 4.

Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years.* Go to Part 4.

**Part 4: Sign Below**

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ Richard M. Critchfield  
Signature of Debtor 1X /s/ Catherine M. Critchfield  
Signature of Debtor 2Date 12/26/2015  
MM / DD / YYYYDate 12/26/2015  
MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 22C-2.

If you checked 17b, fill out Form 22C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Debtor 1 Richard M. Critchfield  
First Name Middle Name Last NameCase Number (if known) 15-24397-GLT**Form 22 Continuation Sheet****Monthly Income****Month 1**

|                                   |          |      |
|-----------------------------------|----------|------|
| Gross wages, salary, tips...      | 4,198.00 | 0.00 |
| Income from business...           | 0.00     | 0.00 |
| Rents and real property income... | 0.00     | 0.00 |
| Interest, dividends...            | 0.00     | 0.00 |
| Pension, retirement...            | 0.00     | 0.00 |
| Contributions to HH Exp...        | 0.00     | 0.00 |
| Unemployment...                   | 0.00     | 0.00 |
| Other Income...                   | 0.00     | 0.00 |

**Month 2**

|                                   |          |      |
|-----------------------------------|----------|------|
| Gross wages, salary, tips...      | 4,198.00 | 0.00 |
| Income from business...           | 0.00     | 0.00 |
| Rents and real property income... | 0.00     | 0.00 |
| Interest, dividends...            | 0.00     | 0.00 |
| Pension, retirement...            | 0.00     | 0.00 |
| Contributions to HH Exp...        | 0.00     | 0.00 |
| Unemployment...                   | 0.00     | 0.00 |
| Other Income...                   | 0.00     | 0.00 |

**Month 3**

|                                   |          |      |
|-----------------------------------|----------|------|
| Gross wages, salary, tips...      | 4,198.00 | 0.00 |
| Income from business...           | 0.00     | 0.00 |
| Rents and real property income... | 0.00     | 0.00 |
| Interest, dividends...            | 0.00     | 0.00 |
| Pension, retirement...            | 0.00     | 0.00 |
| Contributions to HH Exp...        | 0.00     | 0.00 |
| Unemployment...                   | 0.00     | 0.00 |
| Other Income...                   | 0.00     | 0.00 |

**Month 4**

|                                   |          |      |
|-----------------------------------|----------|------|
| Gross wages, salary, tips...      | 4,198.00 | 0.00 |
| Income from business...           | 0.00     | 0.00 |
| Rents and real property income... | 0.00     | 0.00 |
| Interest, dividends...            | 0.00     | 0.00 |
| Pension, retirement...            | 0.00     | 0.00 |
| Contributions to HH Exp...        | 0.00     | 0.00 |
| Unemployment...                   | 0.00     | 0.00 |
| Other Income...                   | 0.00     | 0.00 |

**Month 5**

|                                   |          |      |
|-----------------------------------|----------|------|
| Gross wages, salary, tips...      | 4,198.00 | 0.00 |
| Income from business...           | 0.00     | 0.00 |
| Rents and real property income... | 0.00     | 0.00 |
| Interest, dividends...            | 0.00     | 0.00 |
| Pension, retirement...            | 0.00     | 0.00 |
| Contributions to HH Exp...        | 0.00     | 0.00 |
| Unemployment...                   | 0.00     | 0.00 |
| Other Income...                   | 0.00     | 0.00 |

**Month 6**

|                                   |          |      |
|-----------------------------------|----------|------|
| Gross wages, salary, tips...      | 4,198.00 | 0.00 |
| Income from business...           | 0.00     | 0.00 |
| Rents and real property income... | 0.00     | 0.00 |
| Interest, dividends...            | 0.00     | 0.00 |
| Pension, retirement...            | 0.00     | 0.00 |
| Contributions to HH Exp...        | 0.00     | 0.00 |
| Unemployment...                   | 0.00     | 0.00 |
| Other Income...                   | 0.00     | 0.00 |

**Additional Items as Designated, if any****Remarks**